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04/21/2008

SHAWN W O'DOWD KENYON & KENYON 333 W SAN CARLOS STREET SAN JOSE, CA 95110

Number is required.

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	. I	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/443,038 TILE OF INVENTION	11/18/1999 N: METHOD AND SYS	FEM FOR PROVIDING	JAMES MCCROSSIN LOCAL INFORMATION	OVER A NETWORI	12383/1	6686
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300	\$0 97/22/29	\$1020 88 AWUNDAF2 60868848 1	07/21/2008 1 6660 09443038
EXAN	MINER	ART UNIT	CLASS-SUBCLASS		_	
CAMPEN, KELLY SCAGGS		3691	705-035000	91 FC:256 82 FC:156		

CAMPEN, KELLY SCAGGS	3691	705-035000	02 FC:1504	724.00 DA 300.00 DA	
1. Change of correspondence address or indication	n of "Fee Address" (37	2. For printing on the pate	ent front page; ist	13.00 DA	KENYON LLP
CFR 1.363). Change of correspondence address (or Cha	nge of Correspondence	(1) the names of up to 3 or agents OR, alternativel	registered patent attorneys	KENTON	KENTON BEI
Address form PTO/SB/122) attached.		(2) the name of a single f	firm (having as a member a	2	
☐ "Fee Address" indication (or "Fee Address" PTO/SB/47; Rev 03-02 or more recent) attach		registered attorney or age 2 registered patent attorned	ent) and the names of up to eys or agents. If no name is	3	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

Shawn W. O'Dowd

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

listed, no name will be printed.

(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
FIRST AURA, LLC	San Jose,	Calif.		
Please check the appropriate assignee category or categories (will no	t be printed on the patent):	🔲 Individual 🛣 C	orporation or other private group entity	Governmen
4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies 5 (Five)	A check is enclosed Payment by credit	d. card. Form PTO-203	ny previously paid issue fee shown above; B is attached. rge the required fee(s), any deficiency, or cre or 11-0600 (enclose an extra copy o	
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.2			LL ENTITY status. See 37 CFR 1.27(g)(2).	
NOTE: The Issue Fee and Publication Fee (if required) will not be a interest as shown by the records of the United States Patent and Trad	ccepted from anyone other tha lemark Office.	n the applicant; a reg	istered attorney or agent; or the assignee or	other party i
Authorized Signature & () ~	· ·	Date	21 July 2008	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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34,687

Registration No.

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		(Depositor's name)
		(Signature)
		(Date)
UTOR	ATTORNEY DOCKETNIC	GOVERNA A BIONNIO

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/443,038	11/18/1999	JAMES MCCROSSIN	1439#1- /	6686
FITLE OF INVENTION: M	IETHOD AND SYSTEM FO	OR PROVIDING LOCAL INFORMATION OVER A NETWOR	ek /23 <i>8</i> 3//	

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nonprovisional	YES	\$720	\$300	\$0	\$1020	07/21/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS]		
CAMPEN, KELLY SCAGGS 3691		705-035000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or agents OR, alternative (2) the name of a single registered attorney or a	3 registered patent attom yely, e firm (having as a membo agent) and the names of up meys or agents. If no nam	era 2	KENYON LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

Shawn W. O'Dowd

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(A) NAME OF ASSIGNEE

Typed or printed name

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

FIRST AURA, LLC	San Jose, Calif.
Please check the appropriate assignee category or categories (will not be	e printed on the patent): 🔲 Individual 🛣 Corporation or other private group entity 🚨 Government
4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies 5 (Five)	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. X The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 11-0600 (enclose an extra copy of this form).
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Authorized Signature & U ~	Date 21 July 2008

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